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(Requestor's Name)									
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DATE:

10/13/15

NAME:

NRG MARKETING LLC

TYPE OF FILING: APPLICATION

COST:

130.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

#### **COVER LETTER**

TO:

**Registration Section** 

Div	ision of Corporation	ns								
SUBJECT:	NRG Marketing LL	.c								
SCEULCI.	Name of Limited Liability Company									
		reign Limited Liability Comped to register the above refer								
Please return	n all correspondence of	concerning this matter to the	following:							
	Nicholli Gan									
		N	ame of Person	<u> </u>						
	NRG Marketin	g LLC								
	<del></del>	F	irm/Company							
	11912 W. Was	hington Blvd.								
			Address							
	Los Angeles, C	CA 90066								
	Los Angeles, CA 90066  City/State and Zip Code  Nick@experiencenrg.com									
	Nick@experienc	eenrg.com			·					
		E-mail address: (to be used	d for future annual	report not	tification)					
For further in	nformation concernin	g this matter, please call:								
Nic	cholli Gan		310 at (	255-79						
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number					
Div Reg P.O	ALING ADDRESS: ision of Corporations sistration Section Box 6327 lahassee, FL 32314			Division Registrate Clifton B 2661 Exc	of Corporations ion Section uilding centive Center Circle ice, FL 32301					
	a check for the follow \$125.00 Filing Fee	ing amount:  ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fec &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop.					

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Fore	ign Lunited Liability Co	mpany; must inciu	de "Limited Liai	bility Company," "L.L.C.," or "	LLC."}		
(If name unavailable, enter al Liability Company," "L.L.C."	ternate name adopted for	the purpose of tra	nsacting busines	s in Florida. The alternate name	e must inc	lude "Lit	nited
2 California		3.	20-0027370				
(Jurisdiction under the law company is organized)	of which foreign limited			(FEI number, if applicable)			-
4. 10/1/2015			,				
	(Date first transa (See sections 605.0	icted business in F 1904 & 605.0905,	lorida, if prior to F.S. to determine	o registration.) e penalty liability)			
5. 11912 W. Washington	Blvd.						
Los Angeles, CA 9006	6						
		Address of Princip	al Office)				
6. 11912 W. Washington	Blvd.				$\Sigma_{o}$		
Los Angeles, CA 9006	6					15 OCT	
		(Mailing Address	;)	······································	7	$\Xi$	
7. Name and street address	s of Florida registered	agent: (P.O. Bo	x NOT accept	able)	CRETARY AHASSI	 ယ	official and the second
Name:	Paracorp Incorporate	_		_	Y O	A	
Office Address:	155 Office Plaza Dri	ve, 1st Floor		<del>.</del>	FLO FLO	7:	(
	Tallahassee,			, Florida 32301	ATE	3	
Registered agent's accept		(City)		(Zip code)	> ' '		
lesignated in this applicat	tion, I hereby accept to ons of all statutes relai ny position as register	he appointment dive to the proper ed agent.	is registered a and complete	e above stated limited liabili gent and agree to act in this performance of my duties,	capacity	. I furt	her agr
	<u> </u>	CHACH	ent's signature)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		. •					
8. The name, title or capa				ity to manage is/are:			
Gavin Smith, CEO, 11912	W. Washington Blvd.	. Los Angeles, C	A 90066				
Elyse Frisch, COO, 11912	W. Washington Blvd	Los Angeles, C	A 90066				
Nichollig Gan, Accountan	t, 11912 W. Washingt	on Blvd. Los An	geles, CA 9000	56			
Attached is a certificate urisdiction under the law of the translator must be su	of which it is organized	than 90 days old, I. (If the certifica	duly authentic te is in a foreig	rated by the official having c gn language, a translation of	ustody of the certifi	records	in the der oath
	$A \wedge$						
		Signature of an a	uthorized persor	}			
This document is executed ubmitted in a document to	in accordance with sec the Denartment of Sta	tion 605.0203 (1	) (b), Florida S	Statutes. I am aware that any ony as provided for in s.817.1	false info	rmation	
	Gavin Smith			and the best control for an area to the	,		

Typed or printed name of signee

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

**DATE:** 10/13/2015

ENTITY NAME: NRG Marketing LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Sharon Corre

Sharon Cooke, Assistant Secretary Paracorp Incorporated

## State of California

## Secretary of State

#### **CERTIFICATE OF STATUS**

ENTITY NAME: NRG MARKETING LLC

FILE NUMBER:

200213410081

FORMATION DATE:

05/13/2002

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

**CALIFORNIA** 

STATUS:

**ACTIVE (GOOD STANDING)** 

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

TARY OF STATE TASSEE. FLORIDA



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 6, 2015.

ALEX PADILLA Secretary of State